

HCBS WAIVERS

| WAIVER TYPE | FE | PD | MR/DD | SED |
|--|--|---|--|--|
| ELIGIBILITY GROUP ALL Programs require EES determination of financial eligibility for Medicaid | Individuals age 65 and over Case Mgt Agency determines if Medicaid LTC Threshold met *Services not provided to MR/DD participants. | Individuals age 16-64* Physically disabled by SSA standards Need personal assistance with activities of daily living KBH screening if < 21 Not DD or SPMI TCM Agency determines if Medicaid LTC Threshold met. *if chooses to remain on PD waiver | Age 5 or over Mentally retarded or developmentally disabled Determine eligible for ICF/MR level of care KBH screening if < 21 | Children 4-18 ;under 4 if age exception is approved by the SRS Disability Behavioral Health Services. Also exception process for youth over the age of 18 applying for the SED waiver for the first time. A youth may remain on the waiver until their 22 nd birthday as long as they continue to demonstrate the need and meet clinical and financial criteria. Seriously Emotionally Disturbed Meets Level of Care for admission to a State Mental Health Hospital as determined by a Qualified Mental Health Professional of a CMHC KBH screening if < 21 |
| SCREENING | Authorized case managers using Uniform Assessment Instrument (UAI) | Authorized case managers using Uniform Assessment Instrument (UAI) | Community Developmental Disability Organizations (CDDO) using Developmental Disability Profile-2 (DDP-2) | Community Mental Health Centers (CMHC) completes clinical eligibility determination using Child Behavior Checklist (CBCL) or Child and Adolescent Functional Assessment Scale (CAFAS) |
| MONTH ELIGIBLE FOR A MEDICAL CARD* | Choice Date* | Choice Date * | As approved by Program Manager * | Choice Date * |
| DATE HCBS PAYMENT BEGINS* | Choice Date | Choice Date | As approved by Program Manager | Choice Date |

IF HCBS SERVICES BEGIN 2 MONTHS AFTER THE ASSESSMENT, CHOICE OR PROGRAM MANAGER APPROVAL, THE CONSUMER WILL NOT RECEIVE AN HCBS MEDICAL CARD UNTIL THE MONTH HCBS SERVICES WILL ACTUALLY BEGIN. Example: The choice date is 7/31 and services will begin 9/5. the consumer will be eligible for an HCBS medical card the month of September and date HCBS payment begins will be 9/5.

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|--|---|---|--|--|
| CASE MANAGEMENT | AAA staff or private providers contracting w/ AAA | Case Management Entities | CDDOs and their affiliates | CMHC Staff |
| DISABILITY DETERMINED SSA, DDS or PMD TIER 1 | -NA - | Required | Child: recommend Adult: required | NA |
| SERVICES (provided in addition to regular Medicaid services) | Adult Day Care Sleep Cycle Support Senior Companion Personal Emergency Response/Installation Attendant care services Wellness Monitoring Medication reminder Nursing Evaluation Visit Assistive Technology Oral Health *Targeted Case Management is available through the Medicaid State Plan | Personal Services Assistive Services Sleep Cycle Support Personal Emergency Response/Installation Oral health *Targeted Case Management is available through the Medicaid State Plan | Residential Services Day Services Sleep Cycle Support Wellness Monitoring Medical Alert Assistive Services Personal Assistant Services Temporary and Overnight Respite Family/Individual Supports Supported Employment Oral health *Targeted Case Management is available through the Medicaid State Plan | Wraparound Facilitation/Community Support Independent Living/Skill Building Services Parent Support and Training Respite Care Professional resource family Attendant care *Targeted Case Management is available through the Medicaid State Plan |

Use the ES-3160/3161 to communicate with the SRS eligibility worker and HCBS case manager. Eligibility workers can add the HCBS case manager to the KAECSES ADAD screen if a release is signed by the consumer. This would allow the HCBS case manager to receive the same notices as the consumer.